

Fire Prevention Officer
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District Council of Lower Eyre Peninsula
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FIRE PERMIT APPLICATION

FULL NAME:	----- -----
RESIDENTIAL / RURAL ADDRESS:	----- ----- -----
POSTAL ADDRESS:	----- -----
PHONE / FAX DETAILS:	Mobile Phone: Fax: Home Phone:
E-MAIL DETAILS:	E-mail address:
HAVE FIRE PERMITS BEEN GRANTED TO APPLICANT BEFORE?	YES NO Please Circle
HAS A FIRE LIT BY THE APPLICANT GOT OUT OF CONTROL BEFORE?	YES NO If yes give details ----- -----
HAS APPLICANT HAD A PERMIT REVOKED BEFORE?	YES NO If yes give details -----
HAS APPLICANT GOT A WEATHER MONITOR?	YES NO
IS THE APPLICANT ABLE TO ACCESS WEATHER FORECASTS & FIRE DANGER INDEX	YES NO

For multiple properties extra page 3 will be required

FIRE PERMIT APPLICATION cont.....

DESCRIPTION OF & LAND / VEGETATION & SIZE OF AREA TO BE BURNT e.g.100 hectares canola stubble in open paddock, rowed stubble, piles of tree branches	Hectares: ----- ----- ----- -----
HUNDRED / SECTION / LOT where fire to be lit: RURAL PROPERTY ADDRESS: PROPERTY NAME: WHAT IS THE NEAREST CFS BRIGADE THAT WOULD ATTEND	----- ----- ----- ----- ----- -----
DESCRIPTION OF TOPOGRAPHY OF LAND / VEGETATION SURROUNDING THE AREA TO BE BURNT e.g. scrub or another stubble paddock on gradual sloping land.	Northern Side:----- Western Side:----- Southern Side:----- Eastern Side:----- -

X-----**Sign & Date**

FOR OFFICE USE ONLY

Interview conducted over the phone by

-----**Print Name**